

TROOP ISSUE SUBSISTENCE ACTIVITY EQUIPMENT REPLACEMENT RECORD			1. INSTALLATION NAME AND ADDRESS			2. BLDG NO.	3. PAGE OF
For use of this form, see AR 30-18; the proponent agency is ODCSLOG							
4. ITEM DESCRIPTION		ACQUISITION DATE FROM DATA PLATE a	LIFE EXPECTANCY YEARS b	APPROPRIATE AUTHORITY TB-43-0002 c	PROGRAMMED REPLACEMENT COST d	PROGRAMMED REPLACEMENT YEAR e	REMARKS f
NOUN							
NSN							
MANUFACTURER							
MODEL	SERIAL NO(s)						
NOUN							
NSN							
MANUFACTURER							
MODEL	SERIAL NO(s)						
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MODEL	SERIAL NO(s)						
NOUN							
NSN							
MANUFACTURER							
MODEL	SERIAL NO(s)						

5. NAME/GRADE OF RESPONSIBLE TISO	6. SIGNATURE AND DATE	7. VERIFIED FOR ACCURACY BY RESPONSIBLE DOL	8. SIGNATURE AND DATE